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(Substitute) PTO/SB/21 (02-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/737,017	
	Filing Date	December 14, 2000	
	First Named Inventor	Anthony J. CABRAL	
	Art Unit	3629	
	Examiner Name	Janice A. Mooneyham	
Total Number of Pages in This Submission	12	Attorney Docket Number	C1197/20001

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CENTRAL FAX CENTER

JUL 16 2004

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	[See Remarks section below]
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.63	- Resubmission of Election in Response to Restriction Requirement with the following attached: - Facsimile note and copy of Transmittal Form received from PTO July 15, 2004; - Transmittal Form, Fee Transmittal (in duplicate), Petition for Extension of Time, and Election in Response to Restriction Requirement originally filed July 1, 2004; - Copy of PTO Auto-Reply Facsimile Transmission dated July 1, 2004; and - Copy of Applicant's facsimile confirmation sheet dated July 1, 2004.	
Please charge Attorney Account No. 03-0075 as necessary to effect entry and/or ensure consideration of this submission.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd.; Customer No. 03000	
Signature	Michael J. Cornelison Reg. No. 40,395	
Date	07/16/2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. [Transmitted to Facsimile No. (703) 872-9306]		
Typed or printed name	Michael J. Cornelison	
Signature		Date 07/16/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT EXAMINING OPERATION

PATENT

First Named Inventor: Anthony J. CABRAL

Serial No: 09/737,017

Group Art Unit: 3629

Filed: December 14, 2000

Examiner: Janice A. Mooneyham

Att. Docket No.: C1197/20001

Confirmation No.: 8222

For: NETWORK BILLBOARD SYSTEM AND METHOD THEREOF
RESUBMISSION OF ELECTION IN RESPONSE TO RESTRICTION REQUIREMENTMail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant originally filed an Election in Response to Restriction Requirement and supporting documents via facsimile transmission to the U.S. Patent and Trademark Office (PTO) on July 1, 2004. Yesterday, July 15, 2004, Applicant received a facsimile handwritten note from the PTO notifying Applicant that the PTO had only received a copy of the Transmittal Form (copy of note and Transmittal Form attached).

Accordingly, Applicant hereby attaches copies of the following documents as originally filed on July 1, 2004: Election in Response to Restriction Requirement, Petition for Extension of Time, Transmittal Form and Fee Transmittal (in duplicate). Also attached is a copy of the PTO Auto-Reply Facsimile Transmission dated July 1, 2004 as proof of receipt of the original documents (6 pages) by the PTO. In addition, Applicant attaches a copy of a facsimile confirmation sheet from Applicant's fax machine indicating the transmission of 6 pages of documents.

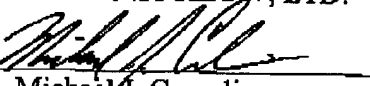
Prompt and favorable action on this matter is respectfully requested.

Respectfully submitted,

CAESAR, RIVISE, BERNSTEIN,
COHEN & POKOTILOW, LTD.

July 16, 2004

By


Michael J. Cornelison

Registration No. 40,395

Customer No. 03000

(215) 567-2010

Attorneys for Applicant(s)

Please charge or credit our Account
No. 03-0075 as necessary to effect
entry and/or ensure consideration of
this submission.

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CAESAR, RIVISE, BERNSTEIN
COHEN & POKOTILOV, LTD.

Attention: Lance

215 - 751 - 1142

We only received
this one page


(Automatic) PTO/BB21 (02-04)

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	First Named Inventor	Anthony J. CABRAL		
	Art Unit	3629		
	Examiner Name	Janice A. Mooneyham		
Total Number of Pages in This Submission	6	Attorney Docket Number	C1197/20001	OFFICIAL

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Remarks:		
Please charge Attorney Account No. 09-0076 as necessary to effect entry and/or enclose consideration of this submission.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd.; Customer No. 03000	
Signature	Michael J. Cornelison, Reg. No. 40,395	
Date	07/01/2004	

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Typed or printed name	Michael J. Cornelison	
Signature		
Date	07/01/2004	

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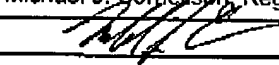
(Substitute) PTO/SB/21 (02-04)

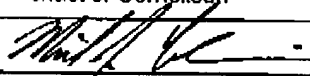
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<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Please charge Attorney Account No. 03-0075 as necessary to effect entry and/or ensure consideration of this submission.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd.; Customer No. 03000 Michael J. Cornelison, Reg. No. 40,395
Signature	
Date	07/01/2004

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 55.00)

Complete if Known

Application Number 09/737,017
Filing Date December 14, 2000
First Named Inventor Anthony J. CABRAL
Examiner Name Janice A. Mooneyham
Art Unit 3629
Attorney Docket No. C1197/20001

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number
Deposit Account Name

03-0075

Caesar, Rivise et al.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 180	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims Extra Claims Fee from below Fee Paid
Independent Claims - 20** = X
Multiple Dependent Claims - 3** = X

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 88	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130	Non-English specification	
1812 2,520	2812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	2804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	2805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	55.00
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	2807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	2808 180	Submission of Information Disclosure Stmt	
8021 40	28021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	2802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 55.00)

SUBMITTED BY

Name (Print/Type)	Michael J. Cornelison	Registration No. (Attorney/Agent)	40,395	Telephone	215-567-2010
Signature		Date	07/01/2004		

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1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

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SUBTOTAL (3) (\$ 55.00

SUBMITTED BY

Name (Print/Type)	Michael J. Cornelison	Registration No. (Attorney/Agent)	40,395	Telephone	215-567-2010
Signature		Date	07/01/2004		

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